

REMARKS/ARGUMENTS

The Examiner's continued attention to the present application is noted with appreciation.

Claims Amendment. Applicant has amended claims 7, 9 and 17. The claims at issue are claims 7, 9, 10, 17 and 18; the remaining claims are canceled or withdrawn. Support for amended claim 7 is found, inter alia, in originally filed claims 1 and 2, and specification page 1, lines 6-28.

35 U.S.C. § 112 Rejections. Claims 7 and 14-16 are rejected under 35 U.S.C. § 112, first paragraph, as containing subject matter not described in the specification in such a way as to reasonably convey to one skilled in the art that the inventors had possession of the claimed invention. Claim 7 is amended such that it solely claims use of bleomycin for treatment of virion disease (claim 7).

Claims 7-10 are rejected for lack of adequate written description. Again, claim 7 is amended such that it solely claims use of bleomycin.

It is asserted that there is no support in the specification for the exclusion of treatment wherein the patient has Kaposi's sarcoma or lymphoma in claim 17. Claim 17 has been amended to omit this limitation. Both Smallheer and Bergamini et al. teach only treatment utilizing adriamycin. This claim is drawn to use of bleomycin. Cheng et al. disclose treatment of a DNA virus, HPV, and neither disclose nor suggest treatment of an RNA virus. Levine et al. disclose only treatment of a disease that is a potential sequela to HIV infection, namely lymphoma. Levine et al. does not disclose treatment of HIV (a disease caused by an RNA virus) as such. Accordingly, Levine et al. does not anticipate the invention as claimed. Similarly, Remick et al. discloses infusion of bleomycin for treatment of AIDS-related Kaposi's sarcoma. However, as is the case with Levine et al., the Remick et al. reference is limited to treatment of a disease that is a sequela to HIV infection, and not treatment of the HIV infection. Thus neither teach nor suggest treating the underlying viral disease by means of administration of bleomycin; at most, they only teach treating other diseases (lymphoma or Kaposi's sarcoma) in patients with HIV infection or AIDS.

Because of amendment and cancellation of other claims, it is believed that the remaining grounds of rejection under 35 U.S.C. § 112 are moot.

C nclusion. In view of the above amendments and remarks, it is respectfully submitted that all grounds of rejection and objection have been avoided and/or traversed. It is believed that the case is now in condition for allowance and same is respectfully requested.

If any issues remain, or if the Examiner believes that prosecution of this application might be expedited by discussion of the issues, the Examiner is cordially invited to telephone the undersigned attorney for Applicant at the telephone number listed below.

Respectfully submitted,

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